August 25, 2014

The Department would like to provide clarification on the new short-acting oral opioid policy that went into effect on August 1, 2014.

The new policy allows for 4 tablets per day, which equals 120 tablets in 30 days.

- If a client has a history of opioid use and is currently receiving more than 4 tablets per day, then the prescriber may call the help desk at 1-800-365-4944 to obtain a six month prior authorization to allow time to taper down to the maximum quantity allowed of 4 tablets per day.
- If a client has a terminal illness or sickle cell anemia, the prescriber may call the help desk and obtain a lifetime prior authorization.
- If the prescriber believes that the client has a pain diagnosis requiring dosing that exceeds the new limit and cannot be addressed using long-acting opioids or will not complete a taper within six months, the provider may request to have the prior authorization request escalated to a Department pharmacist for review. The help desk will provide a six month prior authorization to allow the client to obtain their medication immediately while the Department is reviewing the request for an extended prior authorization. The prescriber will be notified of the Department’s decision.
- **Beginning 8/25/2014, if a client has an acute pain situation and is prescribed more than 4 tablets per day, the pharmacy may enter diagnosis code 338.1 on the claim to receive an immediate override.** The Department will monitor the utilization of the diagnosis code to assure it is being used to override daily limits for cases of acute pain indications only. Prior authorizations will still be required for more than 120 tablets per 30 days. The pharmacy or prescriber may also still call 1-800-365-4944 and request a prior authorization for acute pain. Examples of acute pain situations are post-operative surgery (including dental), fractures, shingles, or a car accident. This is not an all-inclusive list.

Please refer to the “oral opioids- short-acting” section of Appendix P for more information. Appendix P can be found on the Department website link: https://www.colorado.gov/pacific/hcpf/provider-forms

Pain management resources are also available on the Department website link: https://www.colorado.gov/pacific/hcpf/pain-management-resources

Frequently asked questions:

- What is a short-acting opioid?
  - A short-acting opioid is a type of pain medication that provides pain relief for a few hours per dose. Examples of an opioid are oxycodone immediate release, Percocet (oxycodone/acetaminophen), Vicodin or Norco (hydrocodone/acetaminophen), Dilaudid (hydromorphone), Demerol (meperidine), morphine immediate release, and Nucynta immediate release.

- What is the definition of terminal illness?
Terminal illness is defined as a patient in hospice or palliative care.

- What if the client is on a pain contract?
  - If a client is on pain contract, they can still fill prescriptions at varying intervals such as weekly, biweekly, or even every 28 days. A client may refill an opioid prescription after 85% of the previous prescription has been completed. After the six-month prior authorization expires, the 4 tablets per day limit will apply to clients who are on a pain contract.

- Is tramadol included?
  - No, not at this time.

- Do long acting opioids count against this limit?
  - No, they are not included.

- Are buprenorphine products included in this limit?
  - No, buprenorphine products currently have other limits. Details can be found on Appendix P.

- Do butalbital-containing products have limits?
  - Yes the limits on these products are 6 tablets per day which equates to 180 tablets/month. The limit of 6 tablets per day is different from the opioids because this is the recommended dosing limits for these products. These products were included in the policy because some of the butalbital products contain opioids.

For more information please contact the Pharmacy Benefits Section at 303-866-3614.